SENDER: Be sure to follow instructions on other side

PLEASE FURNISH SERVICE(S) INDICATED BY CHECKED BLOCK(S)
(Additional charges required for these services)

☐ Show to whom, date and address where delivered

☐ Deliver ONLY to addressee

RECEIPT
Received the numbered article described below

REGISTERED NO.

CERTIFIED NO.
P 634919

INSURED NO.

1. SIGNATURE OR NAME OF ADDRESSEE *(Must always be filled in)*
Janet Troy

2. SIGNATURE OF ADDRESSEE'S AGENT, IF ANY

DATE DELIVERED
9/28/71

3. SHOW WHERE DELIVERED *(Only if requested, and include ZIP Code)*

9/28/71 AM

No. 634919

RECEIPT FOR CERTIFIED MAIL—30¢ (plus postage)

SENT TO
D. Frost

STREET AND NO.
90 Park Ave

P.O., STATE AND ZIP CODE
New York, N

POSTMARK OR DATE
FREDERICK, MD
SEP 24 1971
USPO

OPTIONAL SERVICES FOR ADDITIONAL FEES

RETURN RECEIPT SERVICES
1. Shows to whom and date delivered ..... 15¢
With delivery to addressee only ..... 65¢
2. Shows to whom, date and where delivered .. 35¢
With delivery to addressee only ..... 85¢

DELIVER TO ADDRESSEE ONLY ..... 50¢

SPECIAL DELIVERY (extra fee required) .....

PS Form 3800
Apr. 1971

NO INSURANCE COVERAGE PROVIDED—NOT FOR INTERNATIONAL MAIL

(See other side)

☆ GPO: 1970 O-397-458